IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

policant:

Rodney G. Johnson

Serial No.

New Application

Filed:

New Application

Docket No.

PA0891.ap.US

Title:

SHUFFLING APPARATUS AND METHOD

CERTIFICATE UNDER 37 C.F.R. 1.10:

'Express Mail' mailing number: ER 154328769 US

September 15, 2003 Date of Deposit:

The undersigned hereby certifies that this Transmittal Letter and the paper or fee, as described herein, are being deposited with the United States Postal Service 'Express Mail Post Office To Addressee' service under 37 CFR 1.10 and is addressed to the Mail Stop: Patent Application, Commissioner for Patents, P.O. Box 1450, Arlington, VA 22313-1450.

By: Suzan L. Levin

Signature:

MAIL STOP: PATENT APPLICATION

Commissioner for Patents P.O. BOX 1450 **ARLINGTON, VA 22313-1450**

This is a request for filing a **Continuation - In - Part** application under **37 C.F.R. 1.53(b)** of prior application Serial No. 09/919,596 filed July 31, 2001 for COLLATING AND SORTING APPARATUS; which in turn, is a continuation-in-part of U.S. Patent Application Serial No. 09/380,943 filed September 13, 1999, now U.S. Patent 6,267,248 for COLLATING AND SORTING APPARTUS which is based on PCT Application Serial No. PCT/AU98/00157 filed March 13, 1998 in Australia.

We are transmitting herewith the following attached items and information (as indicated with an "X"):

\boxtimes	Patent application comprising 16 pages of specification, claims numbered 1-33 and 1 page
	of abstract
\boxtimes	2 Sheets of Drawings – Figures 1 and 2

Unsigned Declaration and Power of Attorney Unsigned Assignment to Shuffle Master, Inc.

Transmittal Sheet W/Certificate of Express Mail

Return postcard



Transmittal with Certificate of Express Mail

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Filing Fees are being deferred therefore the fees should cause the filing to be treated as a filing with missing parts, which missing parts would be provided upon notification by the USPTO.

The fee has been calculated below as follows:

The ree has been calculated	No. Filed	No. Extra	Rate	Fee
TOTAL CLAIMS	33 - 20 =	13	x 9.00 =	\$117.00
INDEPENDENT CLAIMS	6 - 3 =	3	x 42.00 =	\$126.00
[] MULTIPLE DEPENDEN	\$0.00			
BASIC FEE	\$375.00			
	\$618.00			

Authorization is hereby given to charge any additional fees or credit any overpayments that may be deemed necessary to Deposit Account Number 19-2140.

Date: <u>Sept. 15, 2003</u>

Ву: _____

Jennifer K. Farrar

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